PTOISB06 (06-03)

Approved for use through 7/31/2006, ONIS 0651-0052

U.S. Peterd and Teademark Office: U.S. DEPARTMENT OF COMMERCE
to a collection of information unless it displays a vaid OMS control number.

M. DECORPT

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-675							Application or Doctor Number 10/ 209568		
CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY		<b>O</b> R	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED		D N	MUMBER EXTRA		RATE	ÆE		RATE	FEE_
easic Feii (37 GR LIE(a))				٦Г		\$	OR		<u>, 770.80</u>
YOYAL CLAIMS	27	20	7	7 [,	1.1.		OR	x s.fk	126.00
DO CFR 1.16(0)) DEDEPENDENT CLAIMS	1		 }	1 J,	22 -		ok	x = 56	8600
MATTPLE DEPENDENT CLASM PRESENT (27 CFR 1.18(d))							OR	+\$=	·
"If the difference in column 1 is less than zero, enter "O" in column 2.					TOTAL		OR.	TOTAL	213.00
					•				
CLAI		•		OR	OTHER	THAN			
1/18/07	Column 1)	(Cotumn		<u>»                                    </u>	SMALL E	NTITY:	, UK	SMALL	ENTITY
<b>4</b>	CLAMS REMAINING APTER	HIGHES NUMBE PREVIOUS PAID FO	R PRESEN SLY EXTRA	•	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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Carcas rates	U Mir	ue	11 -	71 [	x 8		OR	x \$	$\mathcal{A}$
I ~		EDERT CLASS	OZ CER 1.1860	7 I	+1 •		OR	+5=	(U)
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLASM (BT CFR 1.16(d))					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	$\Box$
· .	(Column 1)	(Colum	ia 2) (Column	3)			2		
	CLAIMS REMAINING AFTER	HIGHE: NUMBE PREVIOU PAID F	R PRESEN		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
M Cocaracata .	27 M	- 2	7 -	7 I	× \$•		OR	x \$•	
S procedure .	H M	una Y	1	71	× 8=		OR	x 5	
FIRST PRESENTATION OF MALTIPLE DEPONDENT CLAIM GT CFR 1.1860)					+5		OR	+5 •	
1,7,14,21,					NOTAL ADD'L FEE		OR.	TOTAL ADD'L FEE	
1,1 11, 11	(Catumn 1)	(Colum		3)		· ·	<b>.</b>		<del></del>
COL	CLAIMS REMAINING AFTER	HIGHE NUMB PREVIOU PAID F	ER PRESE		RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total	AMENDMENT	hus "	•	<b>-</b>	× \$		] , or	x s	
Total Or CFR LINDS Little Or CFR LINDS LITTLE OF CFR LINDS		inus ***		7	x 3 •		OR	x \$•	
8	┨	+5		T or	+ 5				
FRET PRESENTATION OF MALTIPLE DEPENDENT CLAIM (\$7 CFR 1.16(4))					TOTAL ADD'L FEE		OR.	TOTAL ADD'L FEE	
" If the entry in column 1 is less than the entry in column 2, write "I" in column 3.  " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  " If the "Highest Rhumber Previously Paid For" IN THIS SPACE is less than 3, enter "2".									

If the "depast summer Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

The "Highest Humber Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the Philosophila) or process) an application. Confidentially is governed by 33 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, USPTO to process) an application. Confidentially is governed by 33 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, useful application form to the USPTO. Time will very depending upon the individual case. Any comments in the count of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS and Tradement Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.